**附件3**

**嘉陵区企业职工培训中心备案申请表**

**申请单位（人） （盖章）**

**拟设立机构名称**

**申请日期**

**嘉陵区人力资源和社会保障局制**

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| **基本情况** | | | | | | | | | | | | | | | | | | | | | |
| **举办者** | **性质** | | | | **企业（）、事业（）、社会团体（）、个人（）、其他（）** | | | | | | | | | | | | | | | | |
| **名称** | | | |  | | | | | | | | **注册资金（或个人固定资产）** | | | | |  | | | |
| **企业组织代码（身份证件号）** | | | |  | | | | | | | | **主管部门** | | | |  | | | | |
| **法定代表人** | | | |  | | | | | | | | **身份证件号** | | | |  | | | | |
| **拟设立职工培训中心名称** | | |  | | | | | | | | | | **合理回报** | | | | **🞎不要求取得**  **🞎要求取得** | | | | |
| **拟定办学地址** | | |  | | | | | | | | | | **邮政编码** | | | |  | | | | |
| **注册资金** | | | **万元** | | | | | | | | | | **固定资产** | | | | **万元** | | | | |
| **拟定法定代表人** | | |  | | | | | | **身份证号码** | | | |  | | | | | | | | |
| **联系电话** | | | |  | | | | | | | | |
| **培训中心行政负责人** | | |  | | | | | | **身份证号码** | | | |  | | | | | | | | |
| **联系电话** | | | |  | | | | | | | | |
| **内部决策机构人员组成及主要部门负责人** | | | | | | | | | | | | | | | | | | | | | |
| **姓名** | **性别** | **年龄** | | | | **学历** | | **何时何校毕业** | | | | **拟任职务** | | | **专业技术职务（职业资格等级）** | | | | **从事职业教育和培训年限** | | |
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| **财务管理人员** | **姓名** | **年龄** | | | | **学历** | | **何时何校毕业** | | | | **拟任职务** | | | **专业技术职务** | | | | **会计资格证号** | | |
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| **申请办学类型** | | | | | | | | | | | | | | | | | | | | | |
| **培训职业**  **（工种）名称** | | | | **培训层次** | | | | | | | **培训课时**  **（或期限）** | | | | | **培训规模**  **（人/期）** | | | | | |
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| **教学资料** | | | | | | | | | | | | | | | | | | | | | |
| **职业（工种）** | | | | **选用教材** | | | | | | | **出版单位** | | | | | **教材种类（统编或自编）** | | | | | |
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| **办学场地、设施、设备情况** | | | | | | | | | | | | | | | | | | | | | |
| **办学场地** | **形式** | | **总使用面积（㎡）** | | | | | **办公用房（㎡）** | | **教室（㎡）** | | | | **实习场地（㎡）** | | | **宿舍（㎡）** | | | **备注** | |
| **自有** | |  | | | | |  | |  | | | |  | | |  | | |  | |
| **租用** | |  | | | | |  | |  | | | |  | | |  | | |  | |
| **主要** | **类别** | | **名称** | | | | | | | **规格、型号** | | | | | | | **数量** | | | **自有**  **（租用）** | |
| **设施设备** | **办公设备** | |  | | | | | | |  | | | | | | |  | | |  | |
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| **教学仪器、实习操作设施、设备** | | **职业（工种）** | | | | | | | **设施、设备名称** | | | | | | | **规格、型号** | | | **数量** | **自有（租用）** |
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| **安全消防设施情况** | | | | | | |  | | | | | | | | | | | | | | |

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| **主要任课教师情况（1）** | | | | | | | | | | | |
|  | **姓名** | **性别** | **年龄** | **学历** | **何时何校**  **何专业毕业** | **任教专业** | **教龄** | **专业技术（职务）** | **教师资格证情况** | | **专（兼）职** |
| **资格**  **种类** | **编号** |
| **理论教师** |  |  |  |  |  |  |  |  |  |  |  |
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| **主要任课教师情况（2）** | | | | | | | | | | | | |
|  | **姓名** | **性别** | **年龄** | **学历** | **何时何校**  **何专业毕业** | **任教专业** | **教龄** | **专业技术（职务）** | **教师资格证情况** | | | **专（兼）职** |
| **资格**  **种类** | **编号** | |
| **学习指导教师** |  |  |  |  |  |  |  |  |  | |  |  |
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| **专家小组现场评估意见** | **师资配备情况：**  **场地、设备情况：**  **教学资料情况：**  **其他情况：**  **存在问题及建议：**  **专家评估小组成员（签字）：**  **负责人（签字）：**  **年月日** |

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| **人力资源社会保障行政部门意见** | **批准人（签字）：**  **（盖章）**  **年月日** |
| **核准培训职业（工种）及培训层次** |  |
| **企业职工培训中心备案情况** | **备案批复文件：**  **备案批准文号：**  **有效期：年月日至年月日止**  **经办人（签字）：**  **领取人（签字）：** |
| **备注** | **附申报材料清单** |

**填表说明：一、本表一式三份，一律采用打印填写，内容较多时，可另附A4纸附页；**

1. **申请者对填写内容真实性负责；**
2. **本表同其它所需材料一并呈报。**